

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000211312

Entity Name: ORTHOLINKS PERFORMANCE CENTER LLC

Current Principal Place of Business:

4450 E. FLETCHER AVE.
C
TAMPA, FL 33613

Current Mailing Address:

4450 E. FLETCHER AVE.
C
TAMPA, FL 33613 US

FEI Number: 83-1861830

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HUNT, GENE JASON OWNER
4450 E. FLETCHER AVE.
SUITE C
TAMPA, FL 33613 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: GENE JASON HUNT

03/08/2019

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AMBR
Name HUNT, GENE J
Address 4450 E FLETCHER AVE., SUITE C
City-State-Zip: TAMPA FL 33613

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: GENE JASON HUNT

OWNER

03/08/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date